# Understanding and predicting ciprofloxacin minimum inhibitory concentration in *Escherichia coli* with machine learning

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**ABSTRACT** A possible way to slow down the antibiotic resistance crisis is to be more strict when it comes to antibiotics prescriptions. For accurate antibiotic prescriptions, antibiotic susceptibility data are needed. With the increasing availability of next-generation sequencing (NGS), bacterial whole genome sequencing (WGS) is becoming a feasible alternative to traditional phenotyping for the detection and surveillance of AMR.

This work proposes a machine learning approach that can predict the minimum inhibitory concentration (MIC) for a given antibiotic, here ciprofloxacin, on the basis of genome-wide mutation profiles alongside profiles of acquired resistance genes. We analyzed 704 *Escherichia coli* WGS samples coming from different countries along with their MIC measurements for ciprofloxacin. The four most important predictors found by the model, mutations in *gyrA* and *parC* and the presence of any *qnrS* gene, have been experimentally validated before (van der Putten BCL et al, J Antimicrob Chemother. 2019 Feb 1;74(2):298-310. doi: 10.1093/jac/dky417). Using only these four predictors with a linear regression model 65% and 92% of the test samples' MIC were correctly predicted within a two- and a four-fold dilution range, respectively. The presented work goes further than the typical predictions using machine learning as a black box model concept. The recent progress in WGS technology in combination with machine learning analysis approaches indicates that in the near future WGS of bacteria might be cheaper and faster than a MIC measurement.

**IMPORTANCE** Whole genome sequencing has become the standard approach to study molecular epidemiology of bacteria. However, uptake of WGS in the clinical microbiology laboratory as part of individual patient diagnostics still requires significant steps forward, in particular with respect to prediction of antibiotic susceptibility based on DNA sequence. Whilst the majority of studies of prediction of susceptibility have used a binary outcome (susceptible/resistant), a quantitative prediction of susceptibility, such as MIC, will allow for earlier detection of trends in increasing resistance as well as

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the flexibility to follow potential adjustments in definitions of susceptible and resistant

<sup>45</sup> categories (breakpoints).

KEYWORDS: AMR, MIC, machine learning, antibiotics, personalized medicine,

ciprofloxacin

## INTRODUCTION

Antibiotics are an essential resource in the control of infectious diseases; they have been a major contributor to the decline of infection-associated mortality and morbidity in the 20th century. However, the recent rise of antimicrobial resistance (AMR) threatens this situation (1). With the increasing availability of next-generation sequencing (NGS), bacterial whole genome sequencing (WGS ) is becoming a feasible alternative to traditional phenotyping for the detection and surveillance of AMR (2), (3), (4). However, data analysis remains the weak point in this approach; fast and scalable methods are required to transform the ever-growing amount of genomic data into actionable clinical or epidemiological information (5). Several recent studies have shown that machine learning is a promising approach for this kind of data analysis.

Bacterial resistance to antimicrobials is associated with a higher likelihood of therapeutic failure in case of infections. Accurate and fast prediction of resistance in bacteria is needed to select the optimal therapy.

Resistance can be predicted in numerous ways. In addition to classic and highly standardized phenotypic testing of resistance, several methods of resistance prediction have been developed. Most novel methods use a genetic or genomic approach, although transcriptomic approaches have been investigated as well (6), (7), (8). An important factor in the choice of the resistance prediction method is the microorganism under study. For example, the CRyPTIC consortium managed to predict resistance to four first-line drugs in *Mycobacterium tuberculosis*, using only known mutations extracted from WGS (9). However, *M. tuberculosis* displays little-to-no horizontal gene transfer and low genomic evolution rate (10), which makes it feasible to predict resistance only from known mutations (11). For other bacteria, more advanced analysis methods such as machine learning need to be used to allow for accurate prediction.

Machine learning has been applied to predict resistance from WGS data in several settings. To date, these methods have been restricted mostly to assign bacteria to binary categories, i.e. susceptible or non-susceptible (12), (13), (14), (8), (15), (16), (17). However, clinical breakpoints used to define susceptible and non-susceptible categories can change and such binary categories do not allow following more subtle changes in susceptibility in time. MIC measures offer an adequate resolution to see if susceptibility is changing in a population, which is useful for epidemiological purposes. Therefore, a resistance prediction method would preferably output a continuous estimate of resistance similar to MIC, instead of binary classification (S/R) as a number of studies already proposed (18), (19), (20), (21).

Additional issues should be considered when developing a reliable and useful prediction model. Firstly, genotypes are often geographically clustered (22). This implies that if a prediction model is trained on data from one country, this model might not be generalized to data from another country. Data from multiple countries are thus needed. Secondly, complex combinations between chromosomal point mutations and acquired resistance genes influence antimicrobial resistance. Therefore, different data types need to be combined to obtain a biologically relevant set of input data. Lastly, while machine learning is able to analyze highly complex patterns of features,

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Total	Vietnam	UK	USA	NA*	Italy	Denmark	MIC (mg/L)
11	2	0	0	9	0	0	0.010
1	1	0	0	0	0	0	0.012
315	0	92	49	42	13	119	0.015
2	2	0	0	0	0	0	0.016
1	1	0	0	0	0	0	0.023
25	0	4	3	6	0	12	0.030
9	0	0	1	7	0	1	0.060
13	0	0	2	11	0	0	0.120
6	6	0	0	0	0	0	0.125
10	10	0	0	0	0	0	0.190
58	16	3	11	22	0	6	0.250
5	5	0	0	0	0	0	0.380
19	11	0	2	6	0	0	0.500
1	1	0	0	0	0	0	0.750
12	5	0	2	5	0	0	1.000
4	1	0	0	3	0	0	2.000
9	1	0	6	2	0	0	4.000
33	2	1	0	30	0	0	8.000
1	1	0	0	0	0	0	12.00
23	0	0	0	23	0	0	16.00
1	1	0	0	0	0	0	24.00
117	45	0	0	72	0	0	32.00
28	0	0	0	28	0	0	64.00
704	111	100	76	266	13	138	Total

TABLE 1	The collected and used data in the analysis grouped by country and MIC values.

<sup>\*</sup>country metadata is Not Available

the model would preferably output generally understandable data. K-mer profiles have been used to predict resistance, but these can be difficult to interpret (19) (20).

In this study, we focus on predicting a quantitative measure of ciprofloxacin resistance (MIC) for a geographically diverse population of *E. coli* using machine learning.

We chose to study ciprofloxacin resistance in *E. coli* because of three reasons:

- 1. this pathogen-drug combination has been studied intensively
- 2. ciprofloxacin resistance in *E. coli* can be caused by many different chromosomal and plasmid-mediated mechanisms (23)

3. clinical relevance of ciprofloxacin in the treatment of E. coli infections

In our selection of machine learning models, an important criterion was that highscoring features could be extracted from the model. This would allow us to explore the reasoning behind each prediction and thus to interpret and understand the model.

## RESULTS

**Data** 704 *E. coli* genomes were analyzed in this study which had MIC measurement for ciprofloxacin (24). Paired-end sequencing was performed on all of them and the results were stored in FASTQ format. The samples originated from Denmark, Italy, USA, UK, and Vietnam. 266 out of the 704 *E. coli* genomes had no country metadata available and were used as an independent test set, see the MIC distribution on Table 1. The generated phylogenetic tree, Fig 1, indicates that the selected test data significantly

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FIG 1 Midpoint-rooted phylogenetic tree of the 704 E. coli samples that had ciprofloxacin MIC measurement. It is clearly visible that the test data is clustered separately from the training data suggesting the generalization power of our model. Nodes with lower than 80% bootstrap support are collapsed.

differ from the training dataset. All data were deposited in EBI SRA system which consists of raw sequencing data, ciprofloxacin minimum inhibitory concentration, and additional metadata such as the origin of the samples.

Modeling We trained a machine learning model using genome-wide mutation profiles alongside the ResFinder-based profiles of acquired resistance genes. We ranked the predictors proposed by the model itself, see Table S1. The model performed with high accuracy on the training set leave-one-country-out cross-validation using four predictors, see Fig S1. The addition of more features did not seem to improve the

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**TABLE 2** Number of features, *R*<sup>2</sup> score, Pearson correlation, Major Error, Very Major Error, area under the receiver operating curve, Accuracy within a two/four-fold dilution and Mean Absolute Fold Error on the unseen test data. For the AUC, ME, VME the data was binarized using 1 mg/L threshold. The number of features were selected according to the performance using leave-one-country-out validation on the training data, see Fig. S1

model	N_feat	<sup>+</sup> R <sup>2</sup>	<sup>+</sup> R	<sup>#*</sup> ME	<sup>#*</sup> VME	AUC	ACC-2	ACC-4	<sup>#</sup> MAFE	
random forest	4	0.932	0.966	1	0	1.000	0.654	0.944	0.891	
random forest	15	0.890	0.944	4	0	0.998	0.684	0.891	1.007	
linear regression	4	0.914	0.957	1	0	1.000	0.654	0.921	0.998	

\*number of samples

<sup>+</sup>calculated on the log2 values

<sup>#</sup>the lower the better

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cross-validation results, and therefore we kept only the first four, allowing for a simple and understandable model.

Using these four predictors, 265 out of the 266 test data samples were correctly classified by our models at susceptible/non-susceptible level, and more than 92% of the corresponding MIC values were correctly predicted within a four-fold dilution, see Table 2.

These 4 predictors are the following:

- 1. gyrA mutation at amino acid #87
- 2. gyrA mutation at amino acid #83
- 3. parC mutation at amino acid #80
- 4. presence of any qnrS gene

All of the predictors above are binary (presence/absence) therefore there are  $2^4 = 16$  different possible prediction for any sample based on these features, see Table S2. A linear regression model fitted on the log2 values of the MIC measurements could achieve similar performance as a more complex random forest model, see Figure 3.

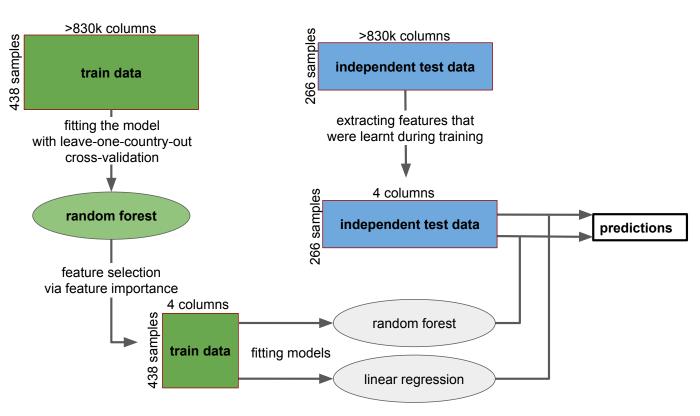
Linear regression is preferred due to its simplistic nature. Having a random forest regressor with hundreds of decision trees and thousands of genomic features as predictors it is difficult to understand why the model made that particular prediction, leaving doubts of its clinical usefulness.

## DISCUSSION

Here we present a novel method for predicting ciprofloxacin resistance for *E. coli*. With minimal prior knowledge (that is mainly the use of ResFinder) and a data-driven approach, we managed to create a machine learning model that was not only accurately predicting the susceptible/non-susceptible labels but also accurately predicting at MIC level. Additionally, the highlighted features of our approach could be narrowed down to four biologically understandable features, making the method more simple and therefore applicable to clinical microbiology practice. It is worthy to note that the model was trained on all possible mutations, not only acquired resistance genes from a curated database. Therefore the model could discover new mutation-based resistant mechanisms.

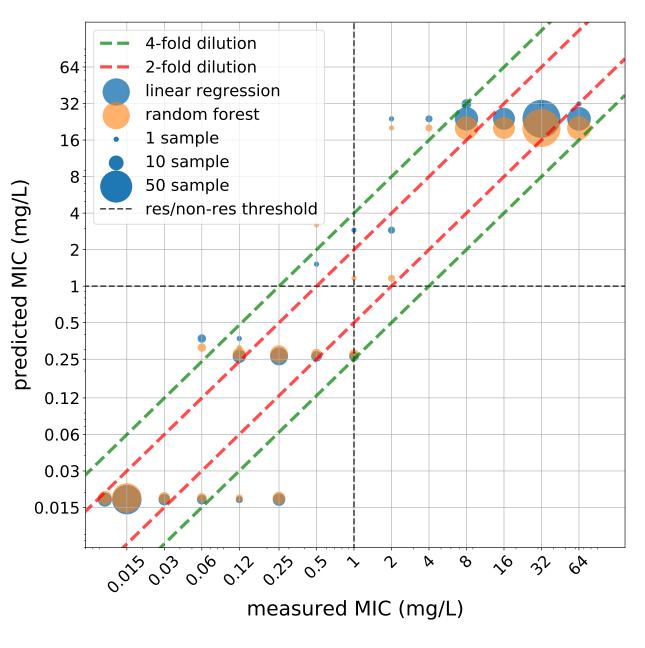
It was previously shown that accurate ciprofloxacin resistant/susceptible binary prediction is possible for *E. coli* (17) (12) (3). For some other bacteria-antibiotic combinations even MIC level predictions were performed (19), (20), (18), (21). This study goes beyond by not only predicting MIC level ciprofloxacin resistance for *E. coli*, but also highlighting the underlying reasoning behind the predictions. Furthermore, this study is one of very few that includes the presence or absence of genes located on mobile

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**FIG 2** Workflow of the study. First, a random forest model was fitted to the training data with leave-one-country-out validation. Feature importances of the fitted models are averaged over all the folds and the four best features are kept. Then the random forest model and a linear regression model were fitted on all the training samples using only the four best features. And model performances are tested using the independent test dataset.

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**FIG 3** Prediction on the unseen test set was generated via random forest and linear regression model using the best four predictors. It can be clearly seen that the two models do not differ much in terms of predicted values.

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genetic elements (MGEs), in combination with chromosomal point mutations, in the machine learning algorithm. This is a crucial step since particularly in Gram-negative microorganisms such as E. coli, AMR is often encoded by genomic determinates located on MGE, or a combination of chromosomal and MGE encoded determinants, as is demonstrated in our study for ciprofloxacin. In addition, this study used data from different countries and regions thus ensuring potential variation in determinants that may contribute to ciprofloxacin resistance are represented in the data set.

Notably, a linear regression model based on only the four most important features of the random forest model performed nearly as well as the full model. These features comprise two gyrA mutations, one parC mutation and the presence of any qnrS gene. All features have been associated with ciprofloxacin resistance before (23). Our results indicate that for prediction of ciprofloxacin susceptibility on the basis of whole-genome sequencing the analysis could be limited to only these four determinants.

However, our study also has some limitations, which mostly pertain to the dataset. For strains with measured MICs in the range of 8-64 mg/L, our model performs worse than for strains with lower MICs. This is most likely due to the fact that the majority of resistant strains in our training data have an MIC of 32 mg/L, with only very few other resistant MICs. This hampers accurate prediction of MIC for more resistant E. coli. Additionally, our dataset is not yet diverse and complete enough to be applied on a wide scale. This is a common problem for many studies aiming to predict resistance from WGS data. Solving this would require continuous updating of databases and an adequate database structure, the latter we have addressed previously (24). Potentially, these efforts could allow machine learning methods to enter routine clinical and epidemiological practices to continuously improve predictions.

Our approach could work for other antibiotics too if an adequate amount of diverse data is collected that includes the full range of susceptibility and resistance values for the antibiotic under study. For *E. coli* the ciprofloxacin resistance determinants that were predicted in our machine learning approach have been experimentally verified, but for other antibiotics, our approach could detect novel genomic variants associated with resistance.

#### MATERIALS AND METHODS

Data preprocessing. Raw reads were mapped on the ATCC 25922 reference genome (https://www.ncbi.nlm.nih.gov/assembly/GCF 000743255.1) using BWA-MEM v0.7.17 (25) with default settings. Pileup files were generated with bcftools v1.9 (26) with "-min-MO 50" settings. SNPs and indels were called using bcftools v1.9 with "-ploidity 1 -m" flags. Further filtering was applied via bcftools v1.9 "%QUAL>=50 & DP>=20" flags. Bcftools output data was expressed as either a SNP (value: 1), an INDEL (value: 5) or no mutation (value: 0) per position in the reference genome. Exact numbers are irrelevant, as tree-based methods are not sensitive to the scale. The intention was to differentiate between reference alleles, SNPs and INDELs at a given position. We also encoded the exact mutations, however, that did not yield in any improvement so in the final version only REF/SNP/INDEL distinction was made. Acquired resistance genes were identified using ResFinder v3.1.0 (27) with a coverage threshold of 60% and an identity threshold of 90% using a database downloaded on 5th Dec. 2018. ResFinder was used with KMA v1.1.4 (28). The ResFinder output data was expressed as presence (value: 1) or absence (value: 0) of resistance genes. The SNP/INDEL data and ResFinder data were subsequently merged which provided a matrix with more than 830,000 columns representing reference genome positions with at least one mutation and 959 columns representing detected resistance genes. Two more binary columns

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were added manually, which describe if any gnr or gnrS gene is present in the given genome or not.

Phylogenetic tree generation. The merged variant call files were converted to a FASTA alignment using vcf2phylip v2.0, retaining positions that were called in at least 50% of isolates (29). The invariant positions were removed from the alignment using snp-sites v2.4.0 (30). The phylogeny was inferred using RAxML v8.2.9 in rapid bootstrap mode (-f a) with 100 bootstraps using a General Time Reversible model with Gamma rate heterogeneity including Lewis ascertainment bias correction (-m ASC\_GTRGAMMA) (31). The resulting phylogeny was visualized in iTOL (32).

Metrics. We used the following metrics for the evaluation of the model: AUC - area under the receiver operating characteristics curve. We used the clinical breakpoint for ciprofloxacin, 1 mg/L, based on the Clinical & Laboratory Standards Institure guideline (33) to binarize the samples whether they are resistant or not. R<sup>2</sup> score - coefficient of determination

 $R^{2} = 1 - \frac{\sum_{i} (y_{i} - \hat{y}_{i})^{2}}{\sum_{i} (y_{i} - \overline{y})^{2}}$ 

where

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- y<sub>i</sub> is the true value for sample i,
- $\hat{y}_i$  is the predicted value for sample *i*,
- $\overline{y}$  is the mean of the true values.

R - Pearson correlation coefficient

$$R_{X,Y} = \frac{cov(X,Y)}{\sigma_X \sigma_Y}$$

where *cov* is the covariance and  $\sigma$  is the standard deviation.

**ME** - major error - when the sample is non-resistant by measurement, but it is predicted to be resistant. Non-resistant and resistant labels are derived from MIC via thresholding. 219

**VME** - very major error - when the sample is resistant by measurement, but it is predicted to be non-resistant. Non-resistant and resistant labels are derived from MIC via thresholding.

ACC-2 - accuracy within two-fold dilution - the fraction of the samples with MIC prop-223 erly predicted within a two-fold dilution. If the measured MIC is x, then the prediction is 224 counted as properly predicted within a two-fold dilution if it falls to the [x/2;2x] interval. 225 ACC-4 - accuracy within four-fold dilution - the fraction of the samples with MIC prop-226 erly predicted within a four-fold dilution. If the measured MIC is x, then the prediction 227 is counted as properly predicted within a four-fold dilution if it falls to the [x/4;4x]228 interval 229

MAFE - mean absolute fold error - The mean absolute difference between the log2 values of the prediction and the measurements.

Importance of the validation scheme. Proper validation is a key element in machine learning as most of the models have a large number of parameters. In image recognition, popular convolutional neural networks can have more than 100M parameters (34). This number of parameters is orders of magnitudes larger than the number of pixels of a single image or even the number of the images in the whole usual training data set, such as ImageNet (35). Having that many parameters it is possible to memorize the training data without generalizing any knowledge to the test data or for future use.

However, with having a proper validation scheme it is easy to test the generalization power of a model. In many cases simply randomly splitting the samples into two groups

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to a test and a validation set is enough. If the data set is small, cross-validation is needed, usually, K-fold cross-validation, where the data set is split into K set, each having the same size. Then, the model is trained on using data from K - 1 set and the predictions are made for the one set that was not used in the training process. Repeating the process, K times predictions can be generated for the whole data set in a way that the model did not see in training time any of the samples for which it is generating predictions. The weights of the model are reset between any two training.

K-fold cross-validation can produce too optimistic results if the samples are clustered. For example, when the data collection is biased, bacterial isolates from one country are predominantly resistant whilst isolates from other countries are predominantly susceptible to an antibiotic. In addition, genetic signatures are often clustered by country (22). Due to such clustering, the model may predict the country of origin of the bacterial isolate, which may be correlated with the MIC, on both the training and the validation data sets, but it is not guaranteed that the same will happen in real-life usage later.

**Leave-one-country-out validation.** Here we propose a more strict and reliable validation method. Instead of randomly splitting the data into *K* different folds, we split the folds by country. Using this approach, the model is not rewarded if it only learns country-specific attributes. Leave-one-country-out validation was performed during the selection of the most important features in the data set, see Table S1. The random forest model was fitted K = 5 times leaving out one country each time from the training data set. Then the feature importances were summed over each fold resulting in the final feature importance rankings.

**Random forest model.** For tabular data most often tree-like models perform the best. The random forest model is an ensemble of numerous (usually hundreds of) decision trees. In the training process, each tree is trained separately and each of them uses only a random fraction of the data, which ensures that the decision trees will not be identical. For a new sample, the prediction is the average of the prediction of the trees, or for classification the category that was predicted the most often by the individual trees. This ensemble technique ends up an accurate, robust, scalable model. The prediction error is usually large for each individual tree, but as long as the errors of the trees are uncorrelated, averaging their prediction lowers the final error.

Random forest regressor was trained with mean squared error criterion,

min\_samples\_leaf = 1, min\_samples\_split = 2, and n\_estimators = 200 for the feature selection. For the final evaluation mean squared error criterion, min\_samples\_leaf = 1, min\_samples\_split = 5, and n\_estimators = 100 parameters were used. The random seed was fixed. Other parameters remained default. Scikit-learn v0.21.2 (36) was used for fitting the model in Python 3.6.5.

**Random forest feature importance.** For decision trees the input variables, the features can be sorted by their importance. The importance can be defined in various ways; the used scikit-learn v0.21.2 (36) implementation calculates the mean decrease impurity averaged over all the trees in the forest (37) (38). In this approach, the identification of the most important predictors becomes feasible even for cases when there are hundreds of thousands of features.

**Model fitting.** All models were fitted on the log2 values of the MIC, which is the natural scale for the MIC measurement. Later the predicted values were converted back to the MIC units.

**Study pipeline.** The pipeline of this study is shown in Figure 2. First, the raw reads were converted to a numerical table indicating mutations and plasmid related resistant genes. In the second step, a random forest model is fitted on the train data

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via leave-one-country cross-validation. Features importances were averaged over each fold. Then the highest-ranking features were kept which significantly reduced the dimensionality of the data. Using this low dimensional training data a random forest model and a linear regression was fitted. For fitting the models always the log2 MIC values were used as a natural scale for the MIC measurements.

At the last step, the performance of the models was evaluated on the unseen test data using the same restricted feature set.

**Availability of data and materials.** All used data is publicly available at the EBI SRA system. Download details and scripts are available at the linked GitHub repository below.

Code is available at https://github.com/patbaa/AMR\_ciprofloxacin .

## SUPPLEMENTAL MATERIAL FILE LIST

- **TABLE S1** shows the feature importances over the different leave-one-countryout folds
- **TABLE S2** shows the parameters of the fitted linear regression and the 2<sup>4</sup> = 16 possible predicted values based on the 4 features.
- **FIGURE S1** shows the leave-one-country cross-validation  $R^2$  results based on the number of features.
- **FIGURE S2** shows the results of the models for an additional 100 *E. coli* genomes from Bangladesh. These genomes had only disk diffusion test measurements, that is the reason they were not discussed in the paper.
- FIGURE S3 shows data quality control checks for the dataset.

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# 320 AUTHOR CONTRIBUTIONS

B.A.P, S.M, D.R., E.G, D.A.A, B.C.L.P., R.S.H, O.L., I.C., C.S. contributed to the design of the study. B.A.P and B.C.L.P wrote the manuscript, S.M, B.C.L.P, R.S.H, O.L., C.S. collected the data. B.A.P, E.G, D.A.A performed machine learning modeling. All authors contributed to the study with insightful discussion. All authors reviewed the manuscript.

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#### SUPPLEMENTARY MATERIALS

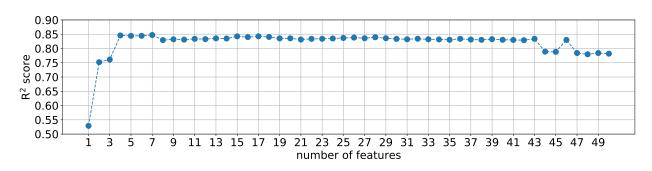
**TABLE S1** Feature importances of the fitted random forest models. Random forest model was fitted on the training data using leave-one-country-out validation. Each entry shows the feature importance for the given feature for the validation step when the samples from the given country were not used to train the model. Sorted by the sum of the feature importances. The features are following the gene # amino acid position naming where possible. For the mutations where there were no genes associated, the naming is chromosome name \_ position. For the features coming from ResFinder, the ResFinder naming was kept. *has\_qnr* and *has\_qnrS* are binary features describing if the sample had any qnr/qnrS entry in the ResFinder results.

feature	Denmark	Italy	USA	UK	Vietnam	sum
gyrA#87	0.555	0.567	0.570	0.558	0.010	2.260
gyrA#83	0.114	0.148	0.107	0.141	0.690	1.200
parC#80	0.181	0.151	0.199	0.172	0.001	0.705
has_qnrS	0.042	0.039	0.019	0.037	0.004	0.140
qnrS1_1_AB187515	0.012	0.007	0.017	0.004	0.000	0.041
blaCTX-M-55_1_DQ810789	0.002	0.009	0.009	0.013	0.000	0.033
blaVIM-48_1_KY362199	0.004	0.001	0.016	0.002	0.000	0.022
CP009072.1_3517597	0.000	0.000	0.000	0.000	0.013	0.014
CP009072.1_1734215	0.000	0.000	0.000	0.000	0.008	0.009
blaCTX-M-14_1_AF252622	0.000	0.002	0.002	0.003	0.000	0.008
CP009072.1_3517591	0.000	0.000	0.000	0.000	0.007	0.007
CP009072.1_113480	0.000	0.000	0.000	0.000	0.005	0.006
CP009072.1_1205372	0.003	0.002	0.001	0.000	0.000	0.006
has_qnr	0.005	0.000	0.000	0.000	0.000	0.005
CP009072.1_459777	0.001	0.002	0.000	0.002	0.000	0.005

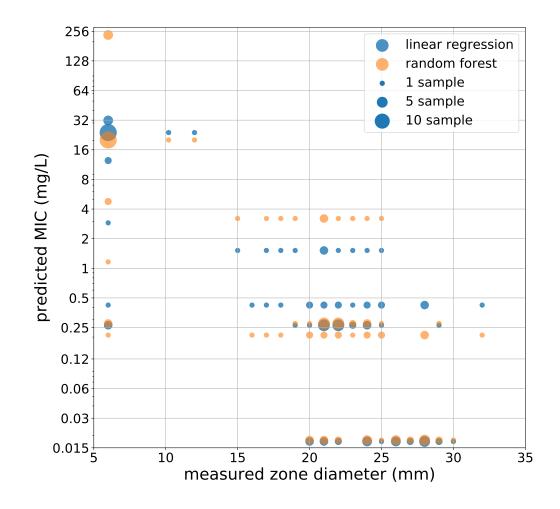
**TABLE S2** Parameters of the fitted linear regression model. The interception is –5.796, and the parameters associated with gyrA#87, gyrA#83, parC#80, has\_qnrS are 4.116, 3.935, 2.078 and 3.542. Prediction is calculated as 2 to the power of the sum of interception and the present mutation/genes.

prediction (mg/L)	gyrA#87	gyrA#83	parC#80	has_qnrS		
0.018	No	No	No	No		
0.076	No	No	Yes	No		
0.210	No	No	No	Yes		
0.275	No	Yes	No	No		
0.312	Yes	No	No	No		
0.885	No	No	Yes	Yes		
1.162	No	Yes	Yes	No		
1.317	Yes	No	Yes	No		
3.207	No	Yes	No	Yes		
3.634	Yes	No	No	Yes		
4.771	Yes	Yes	No	No		
13.537	No	Yes	Yes	Yes		
15.341	Yes	No	Yes	Yes		
20.140	Yes	Yes	Yes	No		
55.585	Yes	Yes	No	Yes		
234.649	Yes	Yes	Yes	Yes		

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**FIG S1** R squared score calculated on the training set using random forest model. The features were ranked based on Table S1 and iteratively a random forest model was fitted on the training set with leave-one-country-out validation. The highest score was achieved with the top four features.



**FIG S2** Prediction for samples that had only disk diffusion test measurement. As the larger zone diameter corresponds to smaller MIC values, a negative correlation is desirable on this plot. The same models were used with 4 predictors as it was used for the test set.

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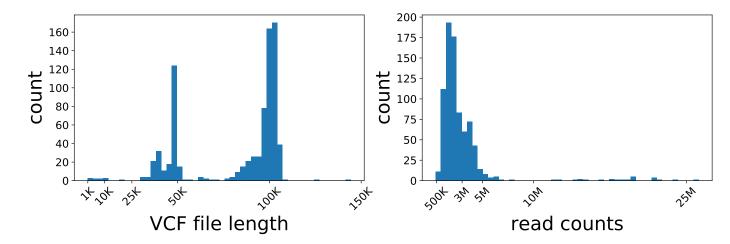


FIG S3 VCF file length distribution and the number of raw reads in the collected dataset.